

**Note**: An amended registration statement must be filed within 10 days of any changes in information.

1. Is this an Amendment?	□ No □ Y	es If yes	s, please enter	your cor	nmittee	e numb	er:	Committee	crum	,c1	
SECTION A: GENERAL	INFORMA	ATION									
A1. Committee/Conduit Name			A2. Registrant Type (Choose One)  Candidate Referendum Recall Conduit  Political Action (PAC) Independent Expenditure (IEC)								
A3. Email	A4	. Phone									
A5. Mailing Address			A6. City	Poli	tical Part	ty L	egislai	tive Campaig	n Con <b>A8. Z</b>		
			Two City						· · · · · ·		
<b>Depository Institution Information</b>							I				
A9. Institution Name	A1	0. Street Addro	ess A11. City			ty		A12. State A13. Zip			
Treasurer/Administrator Information	1										
A14. Name			A15. Email A16				A16.	6. Phone			
A17. Mailing Address			A18. City					A19. State A20. Zip			
Other Officers (Optional)											
Independent and local non-partisan car A21. Name	Independent and local non-partisan candidates: Indicate by an asterisi			are authori	ized to fill	a vacanc			o death	of candidate.	
	A22. Title		A23. Email					A24. Phone			
A25. Name	A26. Title		A27. Email				A	A28. Phone			
Filing Exemption Registrants that will not accept contribution amount of more than \$2,000 in a calent reports. Exempt status is effective only to remain on exempt status must renew their election before the day they appear	dar year are elig for the calendar each year. Ca	gible for exemp r year in which	ntion from filing cam it is granted. Regis	npaign fina trants wish	rate   nce	Yes, thi	s regis	affirmation strant is eligi crant is not el		exemption for exemption	
SECTION B: CANDIDAT	TE COMM	ITTEES									
B1. Office Sought (include District/Branch)			B2. Political Party				B3. Election Date				
Candidate Information			T =			1					
B4. Name			B5. Email				B6. Phone				
B7. Mailing Address			B8. City					B9. State B10. Zip			
Second Candidate Committee  An individual who holds a state or local elective office may establish a			a second candidate  B11. Is this your only registered candidate committee in Wisconsin?  Yes, this is my only candidate committee in Wisconsin								
committee to pursue another state or lo	☐ No, this is my second candidate committee in Wisconsin						Visconsin				
B12. Other Office Held or Sought (in	clude District/F	Branch) Only co	omplete B12 if you r	responded	"No" to B	311.					
SECTION C: RECALL CO	OMMITTI	EES									



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SECTION D: PAC, IEC, AND CO	ONDUITS									
D1. Sponsoring Organization	D2. Email D3.				. Phone					
D4. Mailing Address	D5. City				D6. State D7. Zip					
					ı					
SECTION E: POLITICAL PARTY & LEGISLATIVE CAMPAIGN COMMITTEES										
E1. Political Party (Name candidates appear un					mmittee have a Segregated Fund? No Yes					
Segregated Fund Depository Institution Informa	ation (if applicable)	)	•							
E3. Institution Name	E4. Street Addres	E4. Street Address E5.			E6. So			ate E7. Zip		
SECTION F: REFERENDA COMMITTEES										
F1. Nature of Referendum (if applicable)							F2.	Support Oppose		
SECTION G: CERTIFICATION										
Accurate Information I certify that I am an authorized representati is true, correct, and complete.	ve of the registran	at and that to my knowledge	e all of i	the inform	ation co	ontained wi	thin th	iis registration		
Timely Amendments  I am aware of the requirement to amend this requirement to register within 10 days of meeting to the control of the contro	-		_				vith in,	as well as the		
Records Retention  I further acknowledge the requirement to may of the most recent election in which this regis			ganized	and legib	le manne	er for three	years	s from the date		
Ongoing Compliance This registrant shall continue to maintain its Statutes.	registration and	comply with all applicable	reporti	ing requir	ements i	under Cha <sub>l</sub>	oter 1.	1 of Wisconsin		
Treasurer/Administrator										
G1. Printed Name	G2. Sig	nature					G3.	Date		
Candidate (if applicable)										
G4. Printed Name	G5. Sig	nature					G6.	Date		

**Note**: Use of this form is required by the Ethics Commission for registration of a political committee or conduit under Chapter 11 of Wisconsin Statute. Completion of this form is mandatory for committees that file on paper. It is not the Commission's intention to use any personally identifiable information from this form for any other purpose.

**Item 1. Is this an amendment?** Check the appropriate box. If "Yes" is checked, enter the committee ID number if you have one. If "No" is checked, proceed directly to Section A.

**Section A: General Information.** All committees and conduits must complete section A.

Item A1: Committee/Conduit Name. All committees and conduits must have a name. It is not required that the name include the candidate or organization's name, but it is recommended. A political party committee wishing to operate under the same name as a state political party committee must receive authorization from that state party (WIS. STAT. § 11.0101(26)(a)1).

**Depository Institution Information.** All committees and conduits must designate a depository institution. While it is recommended that all committees have a designated campaign depository account, candidates who will serve as their own treasurer may designate a single personal account to serve as the committee depository account while claiming a filing exemption and may intermingle personal and campaign funds (WIS. STAT. § 11.0201(2) (b)).

**Treasurer/Administrator Information.** Each committee must appoint a treasurer and each conduit must appoint an administrator. Any adult may serve as a treasurer or administrator. A candidate may serve as his or her own treasurer. If a candidate is serving as their own treasurer, this section may be left blank.

**Section B: Candidate Committees.** Candidate committees must complete section B. No other committee type should complete section B.

**Section C: Recall Committees.** Recall committees must complete section C. No other committee type should complete section C.

**Section D: PAC, IEC, and Conduits.** Political action committees, independent expenditure committees, and conduits must complete section D. No other committee type should complete section B. All fields in section D refer to the sponsoring organization's contact information.

Section E: Political Party and Legislative Campaign Committees. Only political party committees and legislative campaign committees should complete section

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**Item E2.** A political party or a legislative campaign committee may establish a segregated fund for purposes other than making contributions to a candidate committee or making disbursements for express advocacy (WIS. STAT. § 11.1104(6)). It is recommended that the committee maintain the segregated fund in a depository account separate from the primary account, but it is not required.

**Items E3 - E7.** If the segregated fund is maintained with the same depository institution as the primary account, write "Same as primary account." in E3.

**Section F: Referendum Committees.** Only referenda committees should complete section F.

**Section G: Certification.** All committees and conduits must complete section G.